Enterprise-Wide Referral and Authorization System – NAS and Referrals

Integrating Policy Decisions and IT System Development
to
Optimize Business Processes and Quality Care

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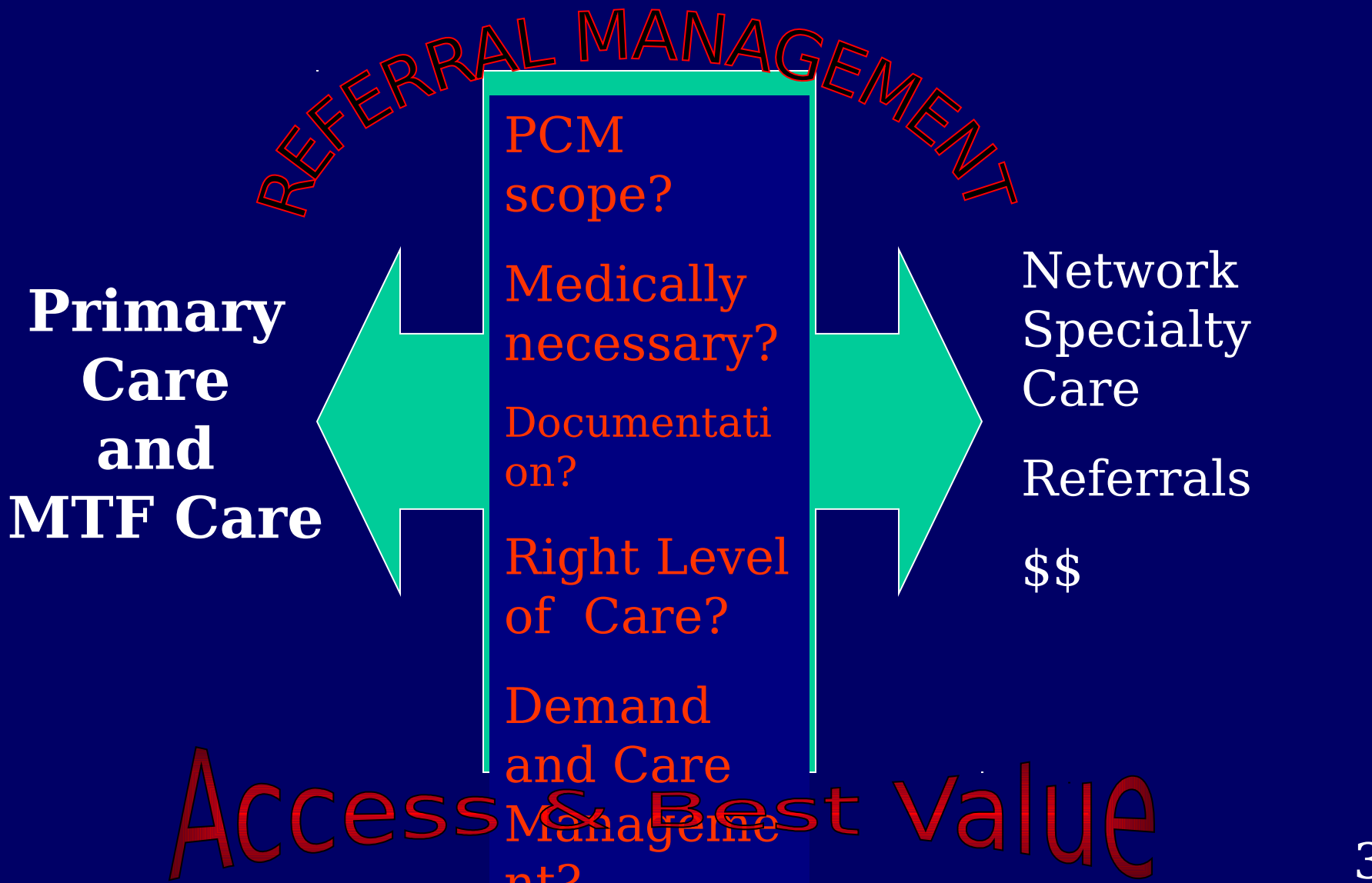
USAF, NC
Program Manager, Referrals
TRICARE Central Region

Background

- HIPAA mandates that electronic R&As utilize the X12 278 format – Compliance date 16 Oct 2003
- The 278 will also handle all Non Availability Statements (NASs)
- This is a major opportunity to standardize and automate MHS business processes
- ASD(HA) has requested TMA develop a strategy for optimizing the R&A process independent of the R&A IM/IT system development effort
- EWRAS is in final prototype testing at DeWitt ACH at Fort Belvoir, VA – contracted by SAIC

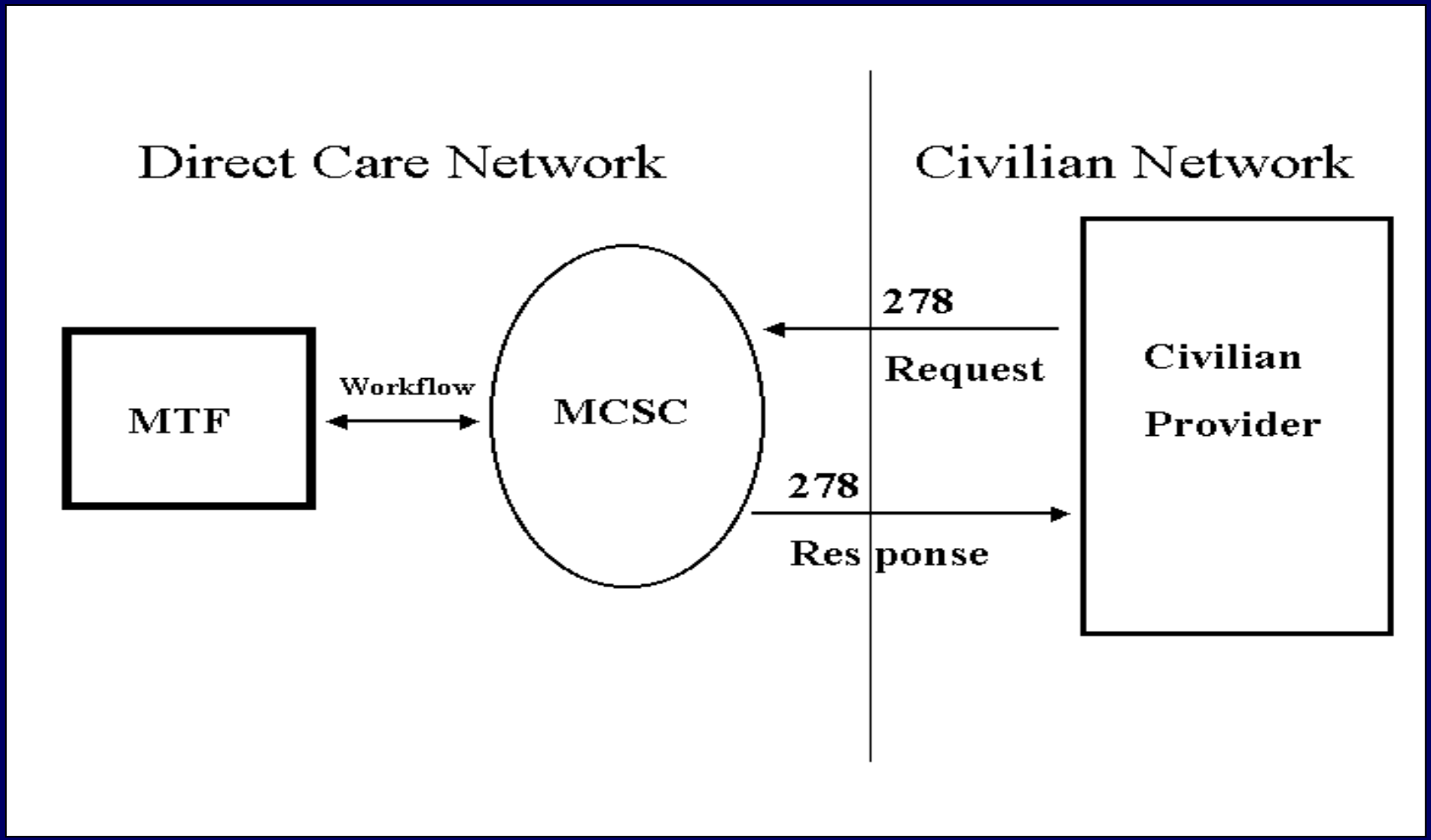
Optimization Opportunity!



Policies

- The Enterprise-Wide Referral and Authorization System (EWRAS) will be used for ALL NAS and Electronic Referrals and Authorizations
- EWRAS will support the TMA policy of focused UM/UR
- Paper based referrals will still continue where there is no TOL/web access. TMA and the services must develop a plan to migrate these to electronic only.

278 Compliance



Policies

The total amount of time for all MTF review activities is one workday (= business day)

- Rather than setting an absolute requirement for all referrals, a threshold metric will be set for all referrals (85% of all Referrals will be authorized in one workday and 100% in three workdays from receipt of referral)
- The clock starts for Access to Care measurement when a complete R&A (278) is electronically received by the first reviewing authority

NAS Process

Changes from hard copy/CHCS/Legacy DEERS

to

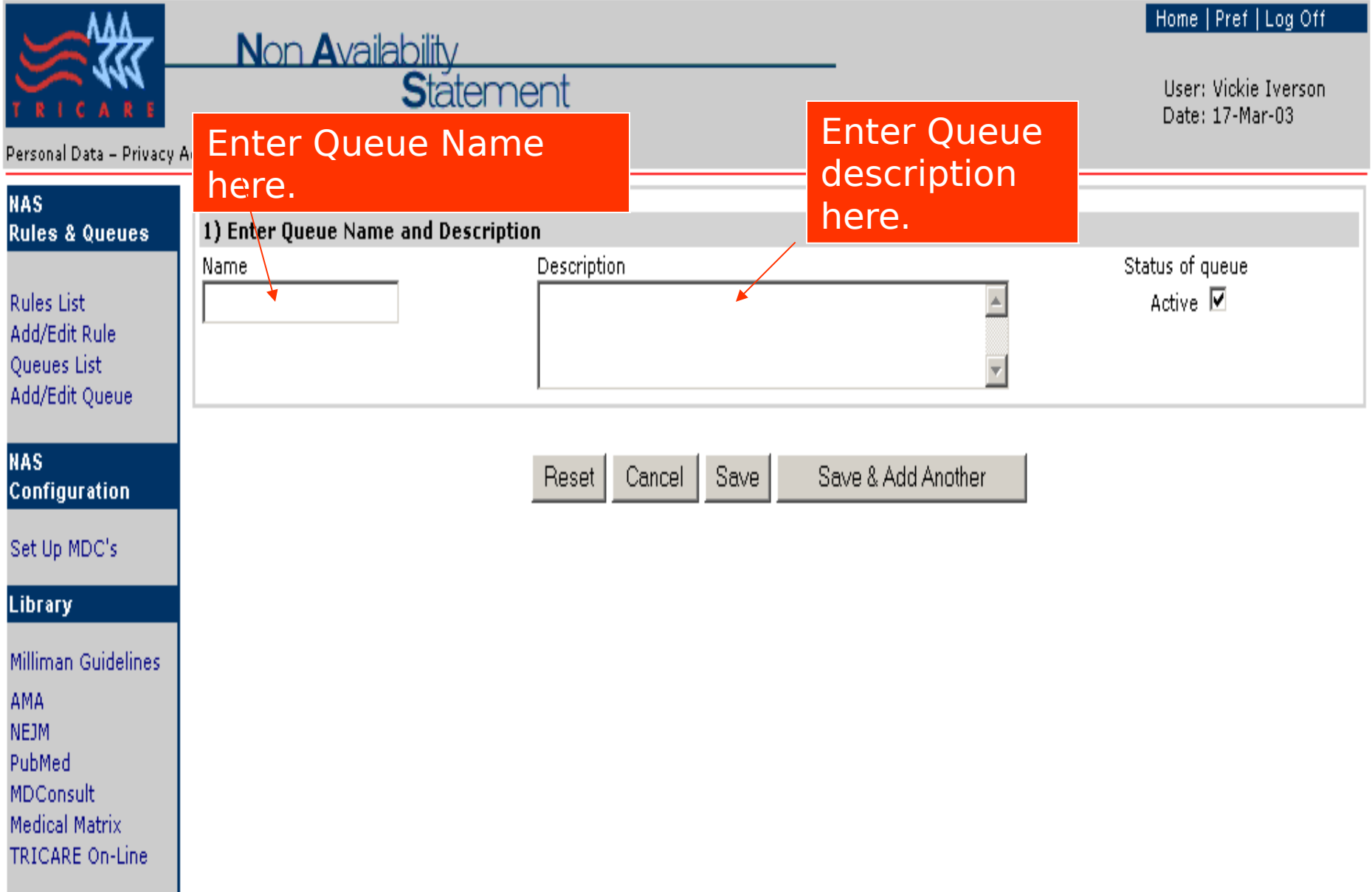
EWRAS – Electronic 31 Oct 03

Document Your Current NAS Business Processes

NAS Spreadsheet

	A	B	C	D	E	F
1	Rule Name	Description	Major Diagnostic Category	Review Authority	Review Authority (optional)	Final Review Authority
2	Nervous System	Rule set for Nervous System	Nervous system	Dept Family Health		DCCS
3	Ophthalmology	Rule set for Ophthamology	Eye	Ophthamology clinic		DCCS
4	ENT	Rule set for ENT	Ear, Nose & Throat	ENT Clinic		DCCS
5			Respiratory System			
6			Circulatory System			
7			Digestive System			
8			Hepatobiliary System & Pancreas			
9			Musculoskeletal System & Connective Tissue			
10			Skin, subcutaneous tissue & breast			
11			Endocrine, nutritional, & metabolic diseases			
12			Kidney & Urinary Tract			
13			Male reproductive system			
14			Female reproductive system			
15			Pregnancy, childbirth, & the puerperium			
16			Normal newborns & other neonates with certain conditions originating in the perinatal period			
17			Blood, blood forming organs, and immunological disorders			
18			Myeloproliferative disorders & poorly differentiated neoplasms			
19			Infectious & parasitic diseases (systemic or unspecified sites)			
20			Mental diseases & disorders			
21			Alcohol/drug use & Alcohol/drug induced organic disorders			
22			Injuries, poisonings, & toxic effect of drugs			
23			Burns			
24			Factors influencing health status & other contacts with health services			
25			Multiple significant trauma (DRGs 484-487)			
26			Human Immunodeficiency Virus Infection (DRGs 488-490)			
27						

Sample Queue Bc



TRICARE Central Region

ENTERPRISE WIDE Referral and Authorization System

Home | Pref | Log Off

User: Vickie Iverson
Date: 17-Mar-03

Personal Data – Privacy Act of 1974 (PL 93-579)

NAS Rules & Queues

Rules List
Add/Edit Rule
Queues List
Add/Edit Queue

NAS Configuration

Set Up MDC's

Preferences

My Preferences

Library

Milliman Guidelines
AMA
NEJM
PubMed
MDConsult
Medical Matrix
TRICARE On-Line

- Enter a name for the Queue and then assign the Review Decision allowed for this queue.

Copy Queue From: –Select an Existing Queue–

1) Enter Queue Name and Description

Name: ENT Clinic

Description: Queue box for ENT Clinic

Status of queue: Active ☑

2) Add the Review Decisions allowed for this Queue

◉ Review ○ Final Approval

Reset | Cancel | Save | Save & Add Another

Sample Rule Set

TRICARE Online.com

A. Enter the name here.

B. Enter the description here.

C. Select an MDC from the drop down list.

D. Select review authorities in the order of their review.

Non Availability Statement

User: Vickie Iverson
Date: 17-Mar-03

Rules & Queues

- Rules List
- Add/Edit Rule
- Queues List
- Add/Edit Queue

NAS Configuration

- Set Up MDC's

Library

- Milliman Guidelines
- AMA
- NEJM
- PubMed
- MDConsult
- Medical Matrix
- TRICARE On-Line

1) Enter NAS Rule Name and Description:

Name: ENT

Description: Rule set for Ear, Nose, and Throat

Status of rule: Active ☑

2) Select the Major Diagnostic Category this rule will apply to:
(you may select more than one)

- Nervous system
- Eye
- Ear, Nose & Throat
- Respiratory System
- Circulatory System
- Digestive System
- Hepatobiliary System & Pancreas
- Musculoskeletal System & Connective Tissue
- Skin, subcutaneous tissue & breast
- Endocrine, nutritional, & metabolic diseases

3) Add the Review Authorities for this NAS rule:

Review Authority
Maximum of 3

- Allergy Clinic
- DCCS
- Dept of Surgery
- Dermatology Queue
- ENT Clinic
- Neurology Clinic
- Ophthalmology Clinic
- Orthopedics Clinic

Add ->

<- Remove

NAS will route in the order specified.
Maximum of 3 entries allowed.

- ENT Clinic
- Dept of Surgery
- DCCS

Next Generation of Contracts: Referrals and Authorizations Oct 2004

What to Prepare For? ACTION ITEMS

RFP Referrals Review

HSSC Requirements

- Send and Receive 278
- "Hands on" First Right of Refusal
- Benefits review
- Beneficiary Notification – Call
- Little to no medical necessity review
- Clinical Results Tracking
- Revised Financing – MTF FRE for enrollees

Policies

- There will be four categories of referrals for the purpose of MTF appointments:
  - Routine – must be seen within 28 days
  - Urgent - must be seen within 24 hours*
  - Emergency – Requires provider – provider contact
  - Five Day – For MTF use only – Must be seen within five calendar days (shorter period if provider designated)**
- Current TRICARE policy states: Routine and Urgent referrals require referral, Emergency situations don't

* An urgent referral that must be triaged by the MTF must have the triage done within 3 hours or by COB (whichever is shorter)

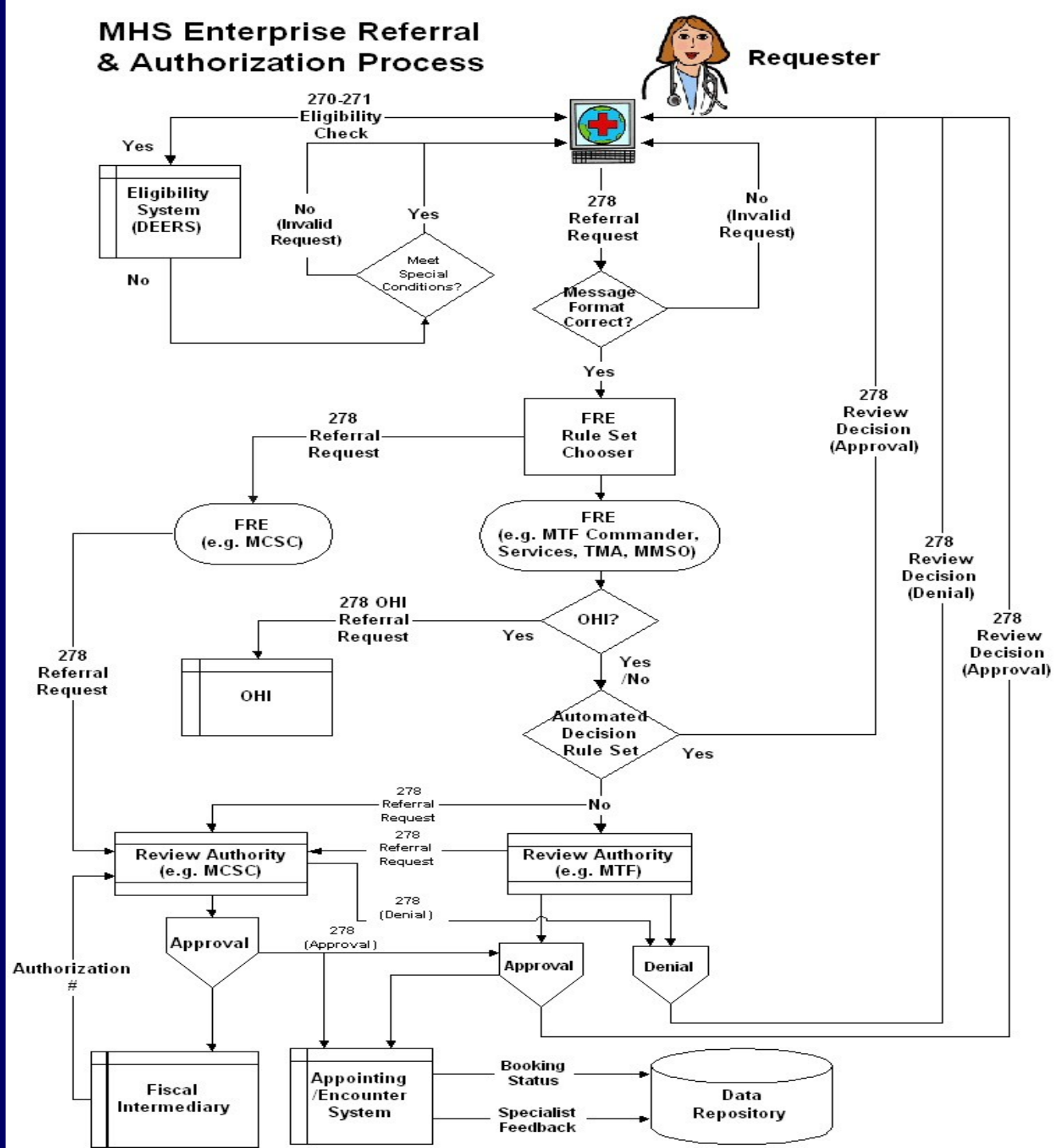
** A five day referral converts to an Urgent referral if it needs to be referred to the HSSC and must be triaged by the MTF within one workday

Policies

- EWRAS will allow a user to track the status of the Referral through its life-cycle

- EWRAS will allow a mechanism for results to be entered by the specialist that can be accessed by the referring provider and PCM - * must be resourced by MTF

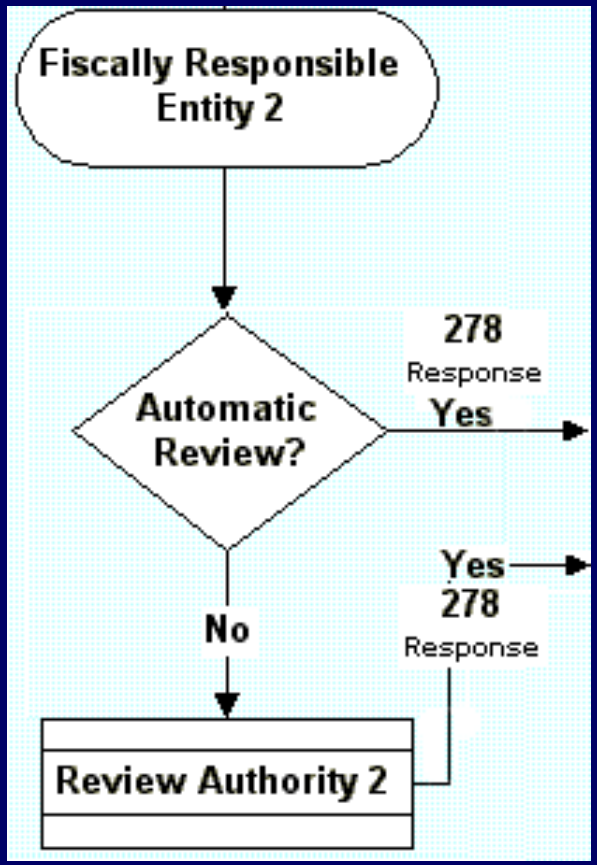
MHS Enterprise Referral & Authorization Process



Request Generation

- Authorized Requester:
  - Provider, Nurse, Assistant, etc.
- Eligibility Check
- Reviewer or Rules
- FRE
- If auto rule/3 sec determination/real time feedback

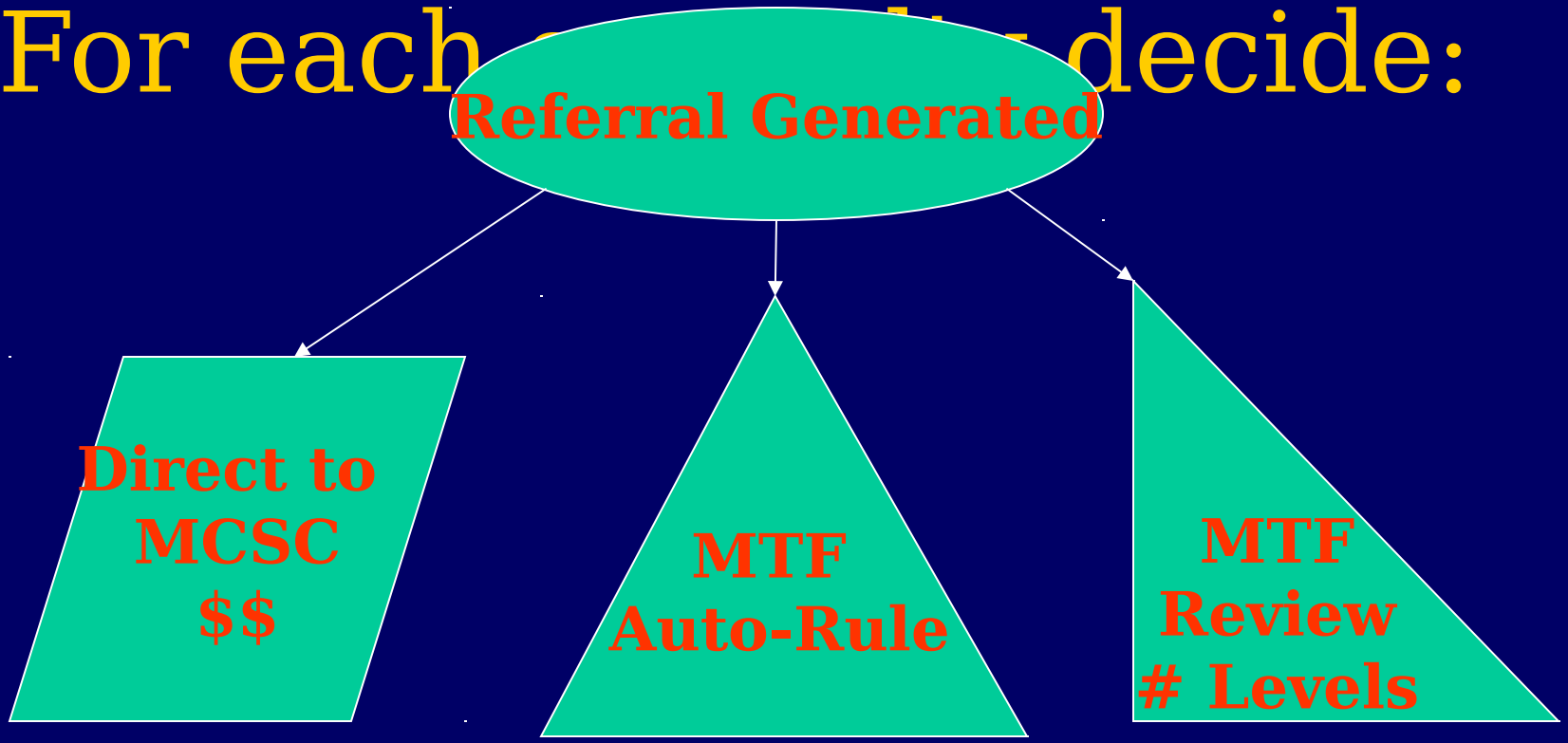
Analyse Request, Determine Review Authority, Respond



- Automatic Response?
- Human Review Required?
- Decision:
  - 278 Response
  - Auto-routed back to Requester

MTF Referral Routing Options

For each [illegible] decide:



Auto Rule Development

Tools

- CHCS Pick List
- Taxonomy Table
- Health Care Delivery Plan List
- CPT Codes
- ICD-9 Codes for rules not yet available

Auto Referral Rule Sets

- CHCS Pick List mapped to Provider Taxonomy
- 8 fields for rules for each specialty
  - Specialty - Ben Cat
  - Patient Cat - Age
  - Gender - Enrollment/DMIS ID
  - Diagnosis (ICD-9 code – phase II)
  - Procedure (CPT code)

Auto rule gives determination within 3 secs!

Rule must be true 100%; otherwise review

Does NOT consider access

Review: UR Options

- Provider or Reviewer consults criteria set
  - Linked to Milliman Care Guidelines (or InterQual)
- Clinical UR to auto rules not available yet.
- Import Criteria based on specialty, diagnosis (admission), imaging or procedure (phase II)
- Add free text - Eg., reminder to fax IEP, referral form, include MRI, labs, etc. (phase II)
- If review not approved, no denial – goes to Second Level Review – MTF defines process.

Mental Health Review Set

This rule set will send all referrals written for any priority, any patient age, and any gender with a Mental Health provider taxonomy to a Mental Health review queue. Any provider that has the Mental Health Review queue would be able to review the referrals in this queue.

Example: Physical Therapy

- Limited scope and access at your MTF
- Auto approve to MTF all AD
- Auto approve all OT/hands to network
- MTF review (MTF RM Clinic) all peds PT
- Documentation specified for Peds Dev Tx
- Auto approve all Chiropractic care to MTF

Types of Internal Reviews

- Approve to Direct Care
- Approve to Network
- Approve to Direct Care and Network
- Approve AD to Civilian Network (SHCP)
- Information Needed
- Re-Direct to another queue
- No appointment required

Regional Standards

- Approval to Direct Care considers BOTH scope AND access – Reviewers must have access info
- Do not use Approve to Direct Care and Network
  - Creates dual work flow
- Do not use Auto-Deny – Will send referral back to requestor
- If determination not to MTF, will go to DMIS ID FRE, if from another DMIS ID
- No appt needed – removes referral – only for duplicates or clean-up

Auto Referral Rule

EWRAS- Add Rule - Microsoft Internet Explorer

File Edit View Favorites Tools Help

TRICARE

ENTERPRISE WIDE
Referral and Authorization System

Home | Pref | Log Off

User: Mary Jones
Date: 17-Mar-03

Rules Manager

Add Rule
Edit Rule

Queue Manager

Add Queue
Edit Queue

Preferences

My Preferences

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Copy Rule From: Mental Health

1) Enter Rule Name and Description

Name Allergy

Description Allergy referral rule

Status of rule Active

2) Select the Health Care Delivery Program this rule will apply to.

ALL
001 Direct Care for Active Duty Sponsors
002 Direct Care for Active Duty Family Members
003 TRICARE Standard for Active Duty Family Members
004 Direct Care of Survivors of Active Duty Deceased

3) Select the Type of Referral this rule will apply to.

Specialty Admission Procedure

4) Select the Taxonomy Code for this type of referral.

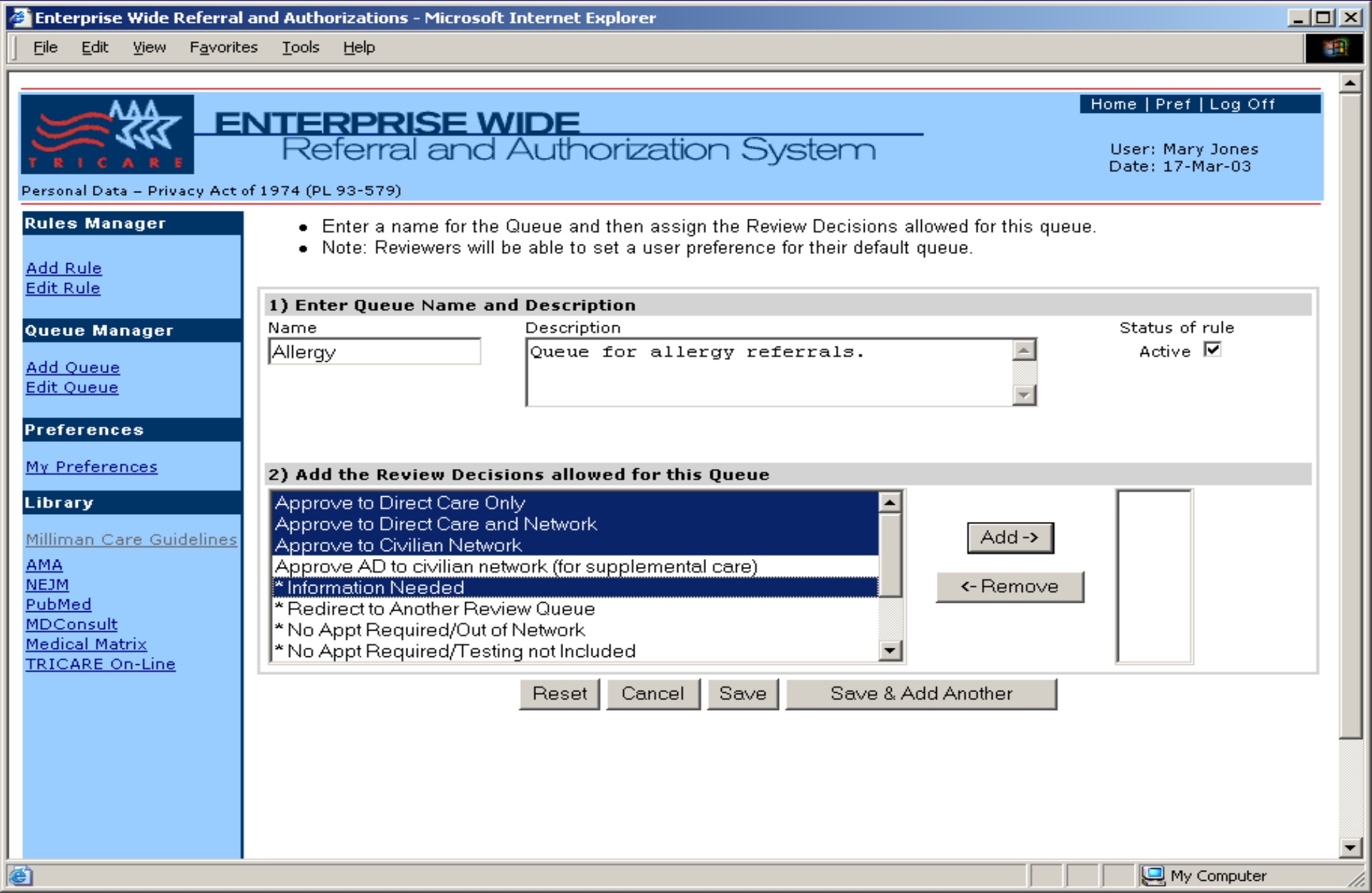
Filter by Specialty: Allergy

Nursing Service Providers/Registered Nurse/Ostomy Care 163WX1500X Nursing
Nursing Service Providers/Licensed Practical Nurse 164W00000X Nursing
Nursing Service Providers/Licensed Vocational Nurse 164X00000X Nursing
Physicians/Allopathic/Osteopathic/Allergy & Immunology 207K00000X Allergy
Physicians/Allopathic/Osteopathic/Allergy & Immunology/Allergy 207KA0200X Allergy
Physicians/Allopathic/Osteopathic/Allergy & Immunology/Clinical & Laboratory Immunology 207KI0005X Allergy
Physicians/Allopathic/Osteopathic/Anesthesiology 207L00000X Anesthesiology
Physicians/Allopathic/Osteopathic/Anesthesiology/Addiction Medicine 207LA0401X Anesthesiology
Physicians/Allopathic/Osteopathic/Anesthesiology/Critical Care Medicine 207LC0200X Critical Care Medicine
Physicians/Allopathic/Osteopathic/Anesthesiology/Pain Medicine 207LP2900X Anesthesiology
Physicians/Allopathic/Osteopathic/Dermatology 207N00000X Dermatology
Physicians/Allopathic/Osteopathic/Dermatology/MOHS-Micrographic Surgery 207ND0101X Dermatology
Physicians/Allopathic/Osteopathic/Dermatology/Dermatopathology 207ND0900X Dermatology
Physicians/Allopathic/Osteopathic/Dermatology/Clinical & Laboratory Dermatological Immunology 207NI0002X Dermatology
Physicians/Allopathic/Osteopathic/Dermatology/Pediatric Dermatology 207NP0225X Pediatrics

5) Select the Patient Age group this rule will apply to.

Done My Computer

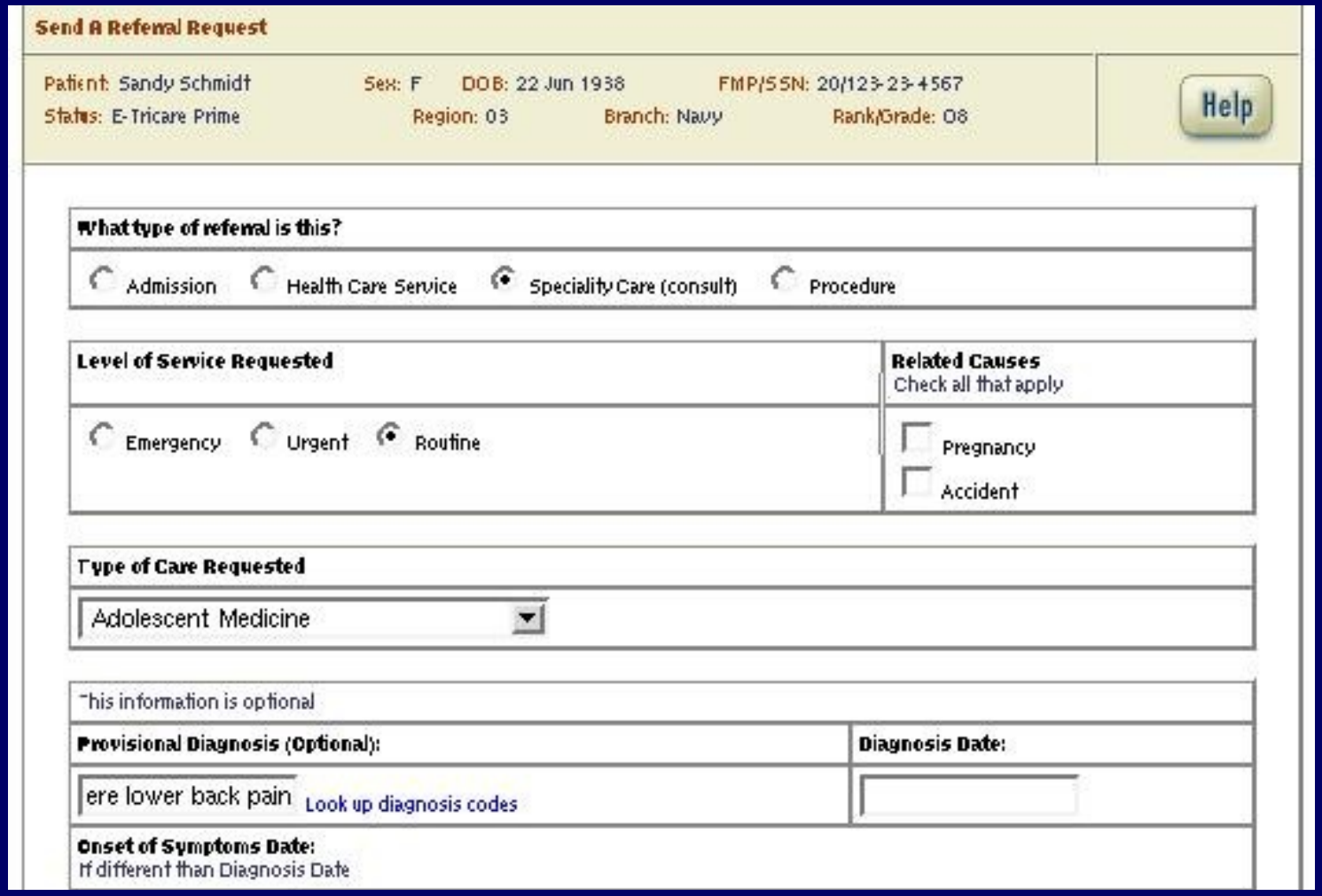
Set up Review Queue



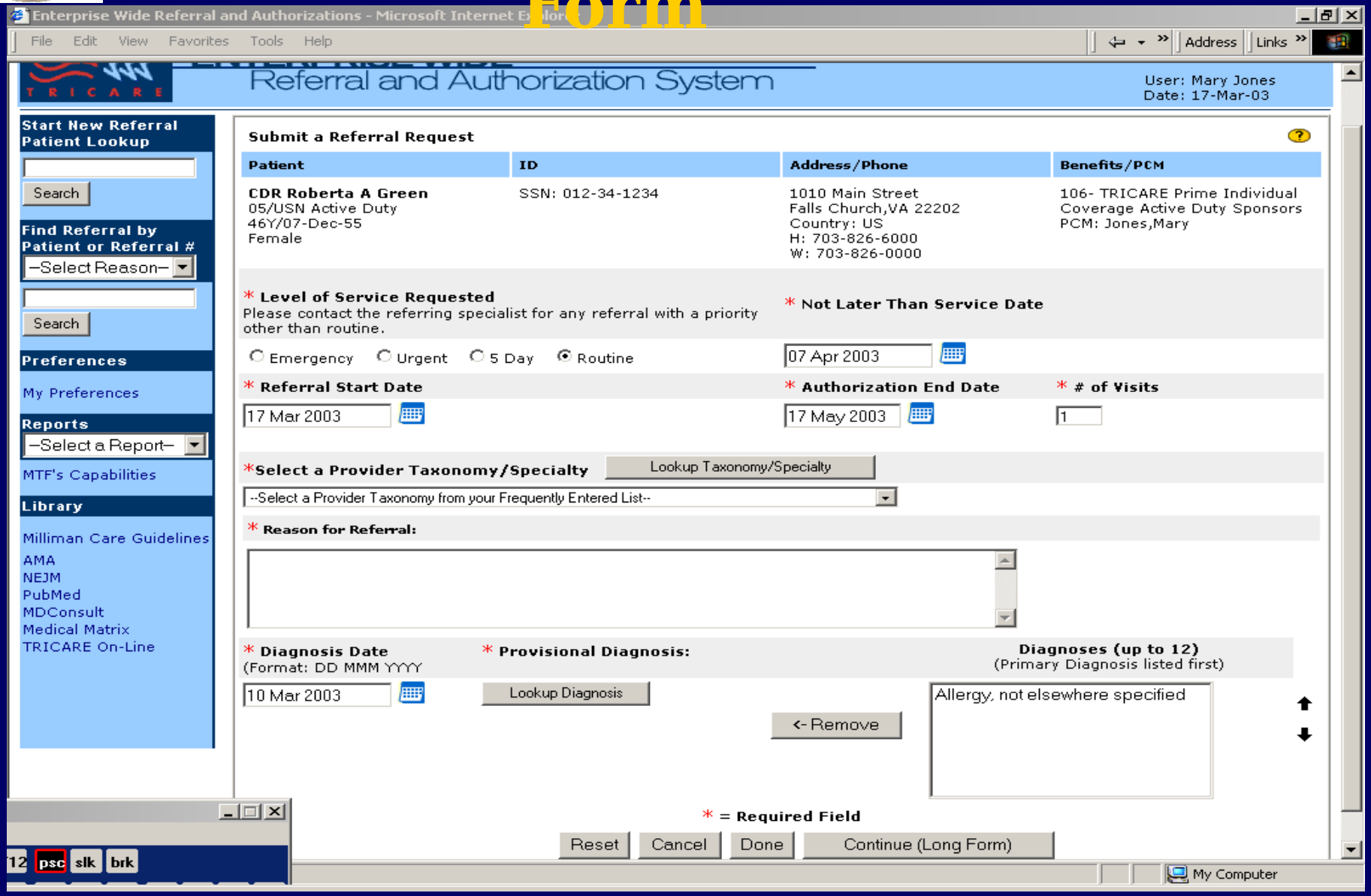
Welcome Menu

HOME
SEARCH
A to Z
HELP
WHAT'S NEW
SITE MAP
TRICARE
your military health plan
Welcome, Jim McCoy
Generate a 278 Request
View Status of Previous Requests
Review Requests Awaiting Approval
Configure Your Profile
Configure 278 Routing/Approval Rules
Logout
| TRICARE Provider Information | TRICARE Management Activity | Conferences |
| Policy and Planning | Link/References |
The TRICARE Website is the Official Web Presence of the TRICARE Management Activity.
Skyline 5, Suite 810; 5111 Leesburg Pike; Falls Church, VA 22041-3206
For help with this website visit our help page
The content of this page was updated on Wednesday 30 January, 2002

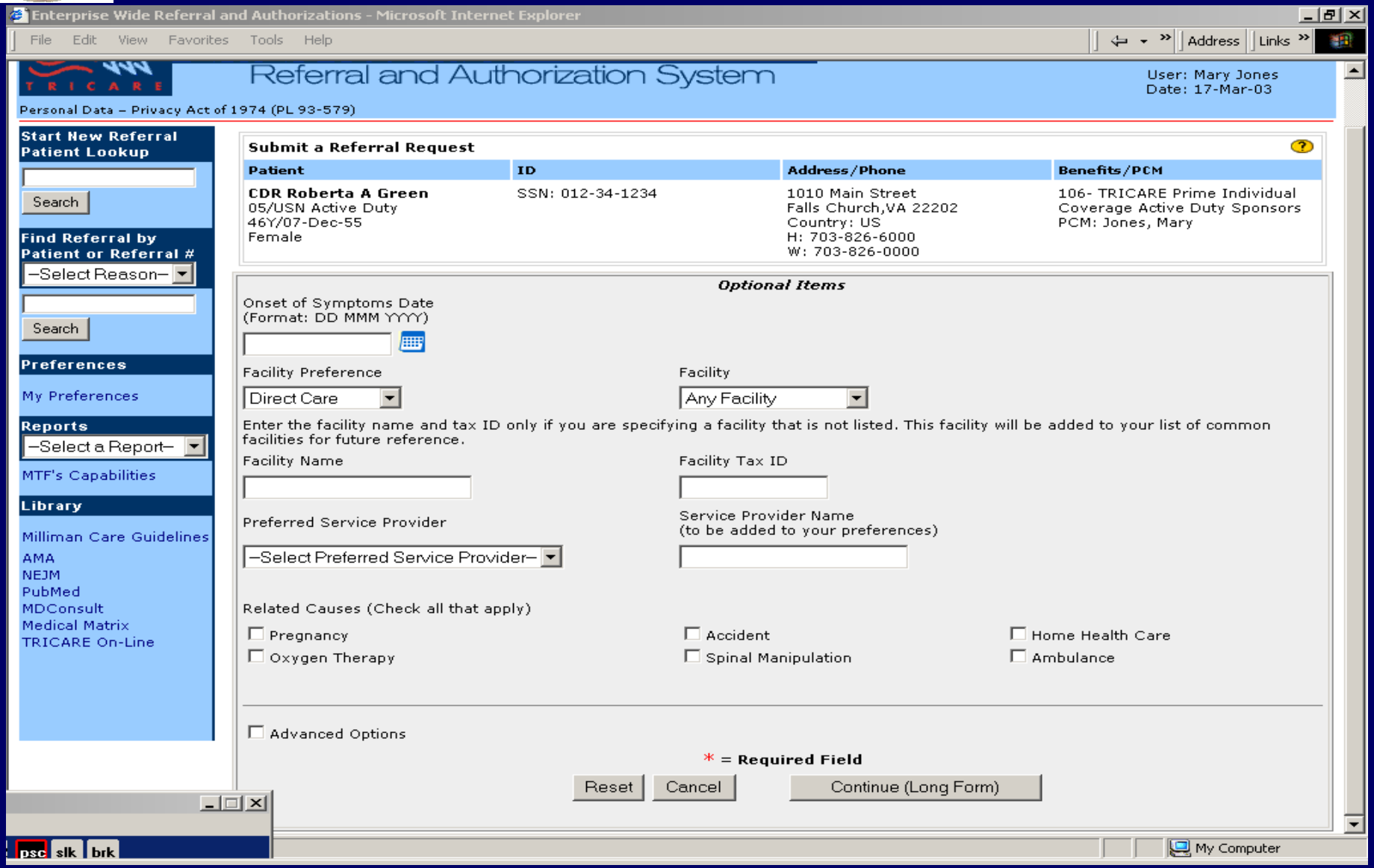
Referral Request



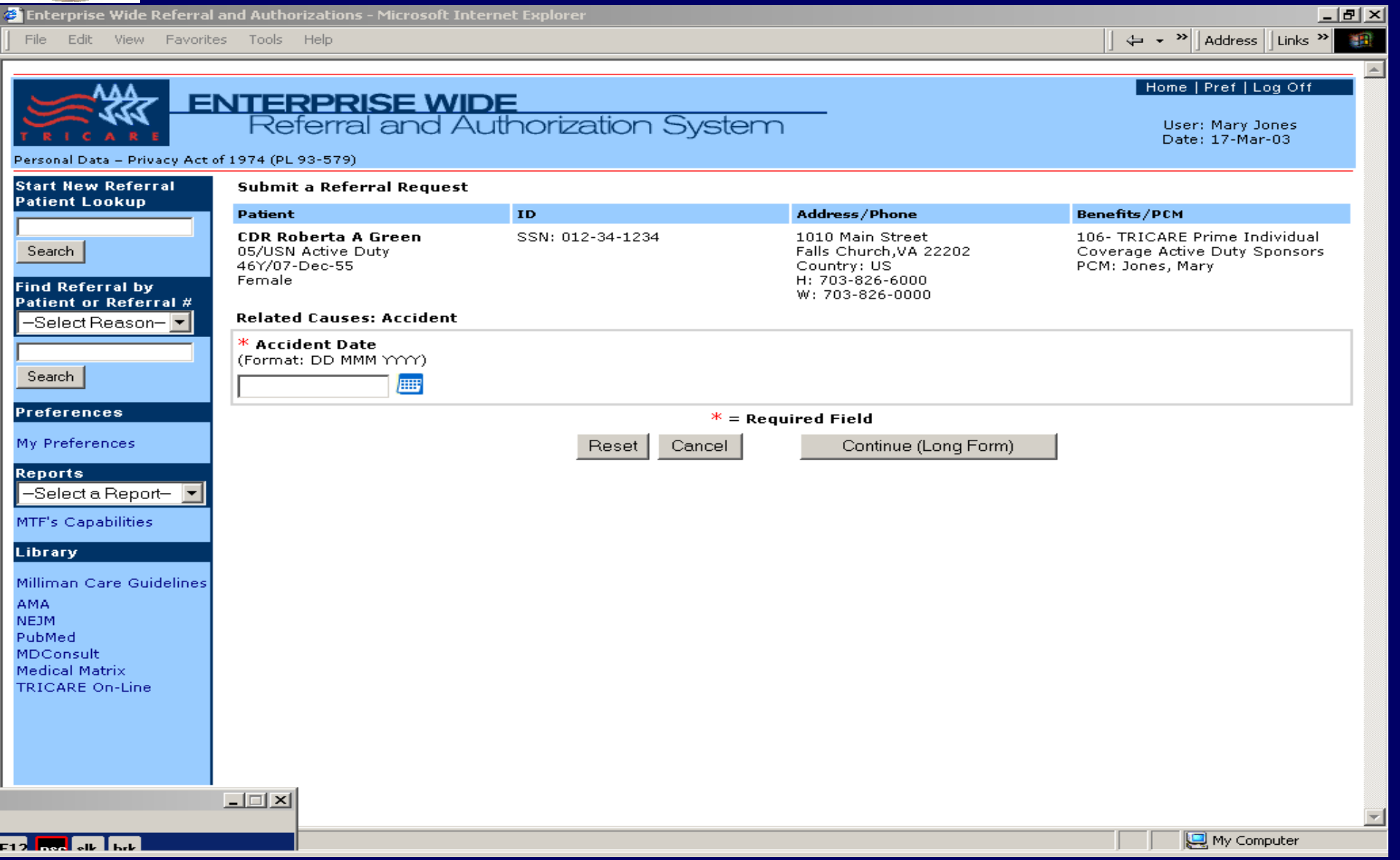
Referral Request – Long Form



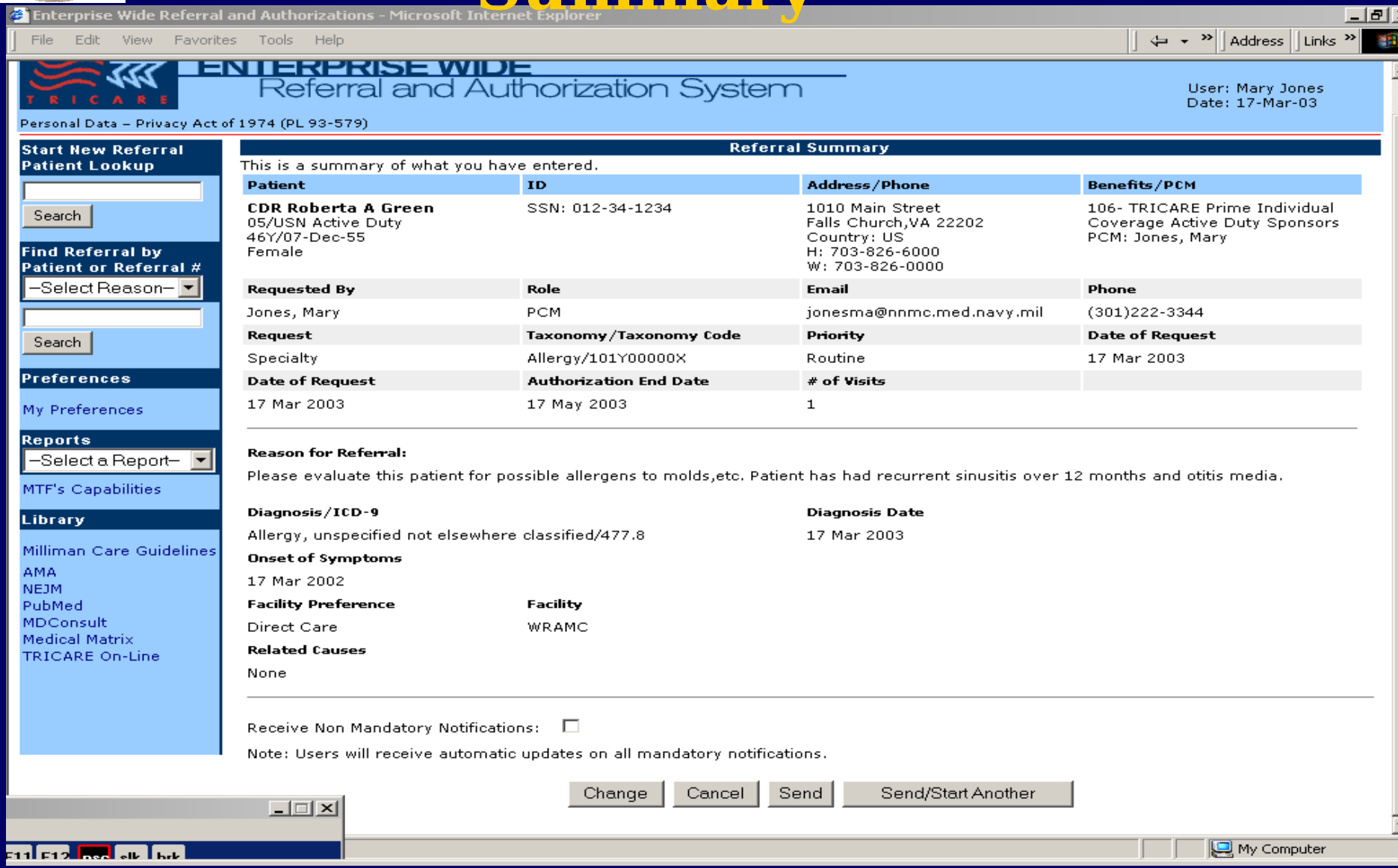
Long Form (Cont)



Long Form (cont)



Referral – Long Form - Summary



Approval

Approval Decision
Patient: Sandy Schmidt
Sex: F
DOB: 22 Jun 1938
FMP/SSN: 20/123-23-4567
Status: E-Tricare Prime
Region: 03
Branch: Navy
Rank/Grade: 08
Help
Approval Decision To change where the service will be performed, select "Modified" as your approval decision.
Approved
If Denied, select a denial reason
Not applicable
Enter any necessary notes concerning this approval decision

Request Status

Status of My Requests

Click on the trace number to view the request details

Date Received	Trace Number	Patient Name	Request Category	Service Requested	Requester Name	Reviewer Name	Type	Response
2002-03-22 10:45:45.0	10	Schmidt, Ralph	Specialty Care (consult)	Adolescent Medicine	McCoy, Jim	McCoy, Jim	Initial	Approved
2002-03-22 10:46:21.0	11	Schmidt, Sandy	Health Care Service	Alternate Method Dialysis	McCoy, Jim	McCoy, Jim	Initial	Not Received

Back to Options

MTF Flexibility; Regional Minimal Template

- Recommend all SHCP continue with MTF Review – Admin and oversight issues
- Import NOT TRICARE BENEFIT message (phase II)
- High Cost/problem prone – consider review
- Rule Sets for UR List with Documentation Requirements
- OPM limited coverage – import text (phase II)
- Consider links to care management service – through UM review

DoD UM Plan: RM is Component of Utilization Management

Utilization Review

Care Management

Demand Management

Referral Management

Referral Management Stakeholders

- IM/IT
- UM
- Managed Care
- PCM Teams
- QM
- Beneficiaries
- HCI
- GPM
- Specialty Chiefs
- DCCS/SGH
- HSSC

MTF Tasks – EWRAS Prep

- Dedicate UM clinical RM Resource
- Build RM team of stakeholders
- Standard electronic SF 513 Process
- Know capacity and referral patterns
- Manage Access – esp high $ specialty care
- Sept 2003 – Complete NAS Rules Table
- Oct 31 2003 – MHS stand-up of NAS
- Dec 2003 – Rule Set to program EWRAS
  - Partner with SHCC/TSC
- Feb – April 2003 – WBT for Referrals
- Oct 2004 – EWRAS Regional Stand-up

MTF Leadership Decisions

- Referral generation roles permissions – surrogates
- How to manage non-eligibles
- Use of consulted provider preference – long form
- Complexity of routing/level/ # of reviews
- Use of UR/medical necessity review
- Second level and appeals process
- How to manage “Approve to Direct Care” when no appt available?
- Electronic resulting vs. paper medical record

EWRAS Advantages

- HIPAA Compliant
- Provision of a more uniform benefit
- System of record and repository for all referrals and NAS's
- Secure, state-of-the-art COE
- Increases Access To Care
- Facilitates Pop Health and MHS Optimization
- 24/7 Access
- Provision of a results repository
- Standardization/automation of R&A processes

TOL – Securely Connecting the MHS

Want to Maximize Same Day Access to Determination, Receive Appointment AND Manage Referrals Efficiently?

You Can Thru EWRAS!

Have Your Cake and Eat it Too!